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Article published May 18, 2007

Judge won't dismiss charge against day care worker

By Brad Kadrich
Staff Writer

Judge Ron Lowe thinks prosecutors might have a hard time convincing a jury to convict a Westland woman who ran a Plymouth day care center of failing to report abuse in the case of a Canton toddler who died last year.

But he's willing to let them try.

Lowe, a 35th District Court judge, Wednesday denied a motion to dismiss a misdemeanor count of failure to report abuse against Jacqueline Hadwin, 36, who was director of Childtime Learning Center in Plymouth Township. The charges stem from the death of 2-year-old Allison Newman, the Canton girl who died Sept. 22, a death the Wayne County medical examiner ruled was caused by head trauma.

The state closed Childtime after two witnesses came forward to say they'd reported their suspicions of child abuse to supervisors at the center.

Hadwin faces 93 days in jail if convicted, but Lowe said Wednesday he isn't sure that'll happen.

"They are going to have to demonstrate the nature of the injuries and what was known by (Hadwin) at the time she made the decision to report or not report," Lowe said. "(Prosecutors) are going to have to prove to the jury (Hadwin) had reasonable suspicion child abuse occurred."

Despite his doubts, Lowe said the decision to deny the motion to dismiss was easy as a matter of law.

"People wanted me to dismiss the case because the prosecutor isn't going to be able to prove the case," Lowe said. "It's not my job to determine the facts at this point. I could dismiss if it was a question of law, but this is a question of fact."

Hadwin's attorney, Tood Flood of Flood, Lanctot and Conner, didn't return calls seeking comment.

Prosecutors declined to respond to Lowe's comments, noting the judge let the charge stand in preparation for Hadwin's June 28 preliminary hearing.

"We believe we had probable cause to charge in this case and that we have proof beyond a reasonable doubt (Hadwin) failed to report suspected abuse when she had a duty to do so under the law," said Maria Miller, spokeswoman for the Wayne County Prosecutor's Office. "We will proceed with our case and, if need be, wait for a jury to speak."

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THE ANN ARBOR NEWS

No charges against mother

But parental rights to 3 kids may be ended

Saturday, May 19, 2007

BY SUSAN L. OPPAT

News Staff Reporter

No criminal charges will be filed against an Ypsilanti Township woman whose three surviving children narrowly escaped a fire in March, six weeks after her son died in another fire.

Washtenaw County prosecutors decided Wednesday that they could not file neglect charges against Latasha Wingard, 25, because the children were not injured in the March 16 fire, Chief Deputy Assistant Prosecutor Steve Hiller said.

But Wingard, who is in the Wayne County Jail on unrelated marijuana, reckless driving and fleeing and eluding charges from 2006, could still lose her parental rights to Natasha Jenkins, 7, Aaliyah Jenkins, 6, and Larryah Hunter, 4.

The children were temporarily taken away from her on April 17, by a Washtenaw Juvenile Court referee who determined conditions under which the children were living with her "are not adequate to safeguard the children from the risk of harm to the children's life, physical health and mental well-being."

The juvenile court neglect allegations stem from the second fire on March 16. Ypsilanti Township Fire officials said oil and burned food in a pan on the stove caught fire at about 6:45 a.m. after Wingard, who smelled strongly of alcohol, passed out.

Firefighters told police that a neighbor rescued the girls, and carried Wingard out of the apartment. Once Wingard regained consciousness, firefighters said, she denied there had been a fire or that she had passed out, and was combative with fire and rescue workers.

When the court took custody of the children last month, a juvenile court referee ordered Wingard to undergo substance abuse evaluation.

But First Assistant Prosecutor Donald Ray said Friday that a new arrest on Tuesday in Pittsfield Township, for drunken driving and driving on a suspended license, could affect her chances of getting the children back.

The neglect case was filed, according to Ray, to get services for her so she can safely reunify her family.

He said she could still go through substance abuse treatment, but "termination always can result if parents are unable or unwilling to bring themselves up to standards so they can care for their children safely."

In the first fire, 2-year-old Larry Hunter died Jan. 31 at Wingard's rented Ypsilanti Township house. Fire officials reported that Wingard was using the oven to heat the house.

The children's respective fathers, Shawn Jenkins, 26, and Larry Hunter, 24, are both in prison. Their parental rights have been suspended, according to court records.

The children have been placed with their maternal grandmother, and Wingard has visitation rights, according to court records.

Staff Reporter Amalie Nash contributed to this report.



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Published May 18, 2007

Kansas man arrested after flying to Michigan for sex with 13-year-old

Morning update

By Derek Wallbank
Lansing State Journal

A Kansas man has been arrested after he flew to Michigan to have sex with a person he thought was a 13-year-old girl.

David Andrew Griffith, 46, was arrested in Ferndale Wednesday, Attorney General's office investigators announced.

According to investigators, Griffith shared sexually explicit photographs of himself with the officer posing as a young teenager, including pictures depicting bestiality.

Officials encouraged parents to check their children's instant messaging buddy lists for the name "looking4knotie", which Griffith used. Anyone who suspects their child had contact with him is advised to call the Attorney General's office at (313) 456-0180.

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State House committee to meet in Flint

HOMETOWN HEADLINES

FLINT

THE FLINT JOURNAL FIRST EDITION

Friday, May 18, 2007

By Marjory Raymer

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FLINT - Local residents are invited to speak out about family and children's issues - especially those involving the Department of Human Services - at a legislative committee meeting Monday.

State Rep. Brenda Clack, D-Flint, scheduled a meeting of the House committee dealing with those issues for 10 a.m. Monday in the auditorium of the Genesee County Building.

"Sometimes the Legislature must come to the people instead of vice versa, especially when the issue is as urgent as this one," Clack said. "We all have a stake in the safety and health of our children."

Presentations are expected by Sheryl Thompson, director of the Genesee County DHS; Prosecutor David Leyton, who will talk about child protection; and Linda Bielskis of Catholic Charities of Shiawassee and Genesee Counties, who will talk about foster care.

- Marjory Raymer

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DETROIT FREE PRESS
FROM OUR READERS

Judges well-trained in child law

May 21, 2007

In a May 6 op-ed column, University of Michigan professors Frank Vandervort and Vivek Sankaran objected to our suggested changes to Michigan's child protection laws, arguing that current laws are adequate because judges already have "broad discretion" in termination of parental rights cases ("Judges have discretion now"). They blame, instead, untrained judges, fear of controversy and poorly paid attorneys for the skyrocketing number of "legal orphans" in Michigan.

But Michigan judges have extensive training and understand the law -- more than 97% of termination decisions are upheld on appeal. The risk of controversy is part of a judge's job. And children's lawyers with low pay and high caseloads cannot explain the huge rise in state-created orphans. We do not ask for our proposals to be accepted uncritically, but don't reject them out of hand.

Maura D. Corrigan

Justice, Michigan Supreme Court

Kenneth L. Tacoma

Chief Judge

Wexford County Probate Court



Medical safety net catches the underinsured, too

Monday, May 21, 2007

JILL ARMENTROUT

THE SAGINAW NEWS

Saginaw County's medical safety net is aimed at helping people with no health insurance, but it also breaks the fall of residents with marginal coverage.

"It's hard to define underinsured," said Lisa G. Hadden, director of the county's Healthy Futures Coalition, which provides free health clinics and helps residents find coverage and a regular doctor.

"Those who can't get any coverage, the working poor who don't qualify for Medicaid but can't afford to pay for care or buy insurance, are the ones we catch from falling through the cracks."

Hospital and ambulance bills are a big problem for anyone on the edge of poverty. Damaged credit could make car and housing loans inaccessible, Hadden said. Her coalition works with emergency room doctors to refer patients to the free mobile clinics so the bills stop, she said.

"Almost everyone who walks in our office has no insurance or very little," said Sister Phyllis M. Klonowski, a Dominican nun and pharmacist who manages the Community Prescription Support Program, 401 Holden in Saginaw.

"Some are elderly who didn't sign up for the Medicare Part D drug benefit. Others have plans that don't cover certain medications or cap drug coverage, and they run out. Some have a \$40 copay for drugs and are taking eight medications. They can't meet that."

Klonowski's agency works with drug companies to get free medicine for those who qualify. She has served about 6,000 clients in less than six years. Only a handful have had private insurance, but that need is increasing, she said.

"We saw 109 new people in 15 days in April, a record for us," she said. "Anyone who has been in an accident, had a stroke or heart attack, complications from diabetes -- all can put you into financial crisis."

Volunteers see an average of 45 people a day, four days a week.

The Saginaw County Department of Public Health and the federally subsidized Health Delivery Inc., 501 Lapeer, provide some services with sliding fee scales. They help the uninsured and also fill in gaps in health coverage.

The Health Department's family planning and immunization clinics, as well as testing for sexually transmitted diseases and tuberculosis, offer discounted care for residents who don't have Medicaid and struggle to pay for care.

"Most fall into the bottom of the fee scale and pay nothing," said Kathy E. Meyer, department finance manager. "Some do pay somewhere along the scale, but the cost is more reasonable than at a doctor's office."

The Health Department recently signed a contract with Blue Cross/Blue Shield to allow staff to bill the company for more services starting this month, Meyer said. Staff already can bill some insurance plans for immunizations.

"Residents who come to our clinics don't have to pay for an office visit, so that can save them money," she said. "We also can identify if there are gaps in their coverage and help them use our services for that. We hope to see more people with insurance using our family planning."

Health Delivery's seven centers mostly provide care to patients with Medicaid or the Saginaw Health Plan

but are open to residents who have private insurance and meet income requirements for discounted rates.

The Health Department, Covenant HealthCare and St. Mary's of Michigan hospital support the nonprofit Saginaw Health Plan.

Someone who makes up to 200 percent of the federal poverty level --that is, \$20,420 a year -- could pay 75 percent of a bill that insurance doesn't fully cover, said Beth A. Ryan, medical billing manager for Health Delivery, 3605 Davenport.

The Wadsworth Dental Center, 2308 Wadsworth, offers dental care on a sliding fee scale, and two doctors at the Janes Street Academic Community Health Center, 1522 Janes in Saginaw, provide vision care.

Health Delivery served 45,886 patients in 2006, and numbers continue to go up, officials said. v

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Insurance not enough

Sunday, May 20, 2007

JILL ARMENTROUT

THE SAGINAW NEWS

Dr. Louis L. Constan, a Saginaw Township family physician, says he sees the problem every day in his office.

Patients are forgoing medication, physical exams, even surgery that would relieve chronic pain, all because they can't pay the bills and don't want to owe anyone.

"The saddest thing is when someone should have surgery," he said, "but they don't want to do it."

Those patients aren't uninsured. They have health care coverage, but the plans don't cover all services, leaving them at risk of medical debt and inadequate care.

The problem is getting worse among those who seek medical care at Saginaw's hospitals.

So far this year, more patients have had difficulty settling their debts than a year ago at Covenant HealthCare. And like billing advisers at St. Mary's of Michigan hospital, employees are working with patients to try to figure out how to pay the tab.

There are 45 million people nationally and 1.5 million in Michigan without health insurance. Another 16 million or more adults nationally are underinsured, meaning their insurance doesn't adequately protect them against health care expenses, says the Commonwealth Fund, a New York City-based national policy group.

A 2005 Commonwealth survey found that more than one-third of adults 19 to 64 had medical bill problems in the past year -- and 62 percent of them were insured. More than 9 million of the underinsured have employer-based insurance, another study from the federal Agency for Healthcare Research and Quality shows.

Underinsured adults are almost as likely as the uninsured to go without needed medical care and to incur medical debt. More than half in surveys reported avoiding doctor visits or tests. Lower-income and sicker adults are most at risk of having inadequate coverage.

Workers from the factory floor to the front of the classroom are paying more for their health insurance as businesses and the public sector trim costs.

Estimates using census data indicate 20 percent of Saginaw County residents -- more than 40,000 people - have no or very little health insurance coverage. That compares to 11 percent who are uninsured in the state and 6 percent of the nation. It isn't clear how many in the county are underinsured.

"I see it many times a day," Constan said. "Out of 20 or 30 patients a day, at least five or six can't afford treatment. Others probably don't say anything about it."

"If I know they have trouble, we have to prioritize and get them on the least expensive medicines," Constan said. "After that, sometimes you have to prioritize treatment. Keeping blood pressure under control is almost always No. 1, but blood sugar might be less, thyroid less. This isn't what I was taught to do as a physician."

The problems are multiple: As employers or individuals try to reduce insurance premiums, copayments and deductibles go up. Employers or insurance carriers limit services they cover, or they cap overall payments. Individuals with Medicare don't have any other kind of insurance to help pay for gaps in coverage.

More than half of all personal bankruptcies nationally are because of, at least in part, problems with medical costs, a study published in "Health Affairs" in 2005 showed. The U.S. Bankruptcy Court for the Eastern District of Michigan in Bay City, which includes Saginaw County, logs thousands of bankruptcies per year.

Underinsured

The Commonwealth Fund defines an underinsured person as someone who has annual out-of-pocket medical expenses amounting to 10 percent or more of his or her income or someone who has health plan deductibles that take up 5 percent or more of their annual income.

An individual living at 200 percent of the federal poverty makes \$20,420 a year. Five percent of that is \$1,021. That means that \$1,000 for a yearly deductible or several \$50 copayments for medicine puts them over the threshold.

Commonwealth researchers estimated their number of underinsured based on a 2003 survey of more than 3,000 adults 19 to 64. In spite of gaps in coverage, a third of the underinsured also had annual premiums of \$1,500 or more, and nearly half paid premiums that amounted to 5 percent or more of their income.

Washington, D.C.-based Families USA estimates the number of insured Americans spending more than

10 percent of their income on health care including premiums is more than 51 million.

Many underinsured don't have coverage for prescription drugs, dental care or vision benefits. Mental health treatment often isn't covered, as well as care for physical ailments.

Mental health parity

John G. Greenough, 41, of Saginaw sees a therapist weekly and takes medicine to manage his bipolar disorder that includes episodes of depression and mania.

He isn't working now, but has Blue Cross insurance through his wife's job at a credit union. The plan pays for his care, but his family of four had to meet a \$4,000 deductible first, he said. They also pay a \$100 monthly premium.

Greenough said a different health plan that paid 50 percent of psychiatric care required him to pay more than \$5,000 out of pocket last year, leaving his family in debt.

"I still owe \$3,800 of that. Mental health coverage is limited at best," he said. "I am very fortunate that my insurance paid even 50 percent, since therapy visits cost \$100 each. Others can't afford to go at all."

Greenough, who has a ministry degree and is studying to become a licensed therapist, leads support groups for people with depression and bipolar disorder at First Presbyterian Church in Saginaw.

"We have members who are in debt or who come to the group because they can't afford therapy," he said. "They leave a hospital with bills because their insurance only pays for 10 days."

Legislators continue to consider "mental health parity" bills that would require health plans to cover treatment for mental illness on the same terms and conditions as coverage for medical services.

Half dose of reality

Dr. Raana W. Akbar, a Saginaw Township allergist, said prescription coverage is an enormous problem for her patients without adequate insurance.

"I see moms scrimp on medications to get it for their children and seniors taking half doses. It breaks your heart. I wish there was a universal health plan."

Akbar said she works with drug companies and gives samples to help patients with asthma and other chronic lung diseases.

Retired seniors on Medicare still are having a hard time paying for drugs, even if they signed up for the Part D prescription plan, she said. Insurance companies that require \$40 copayments for drugs make multiple prescriptions too expensive even for working families, Akbar said.

"Some have trouble paying for office visits, too. If a patient is coming regularly but can't always pay, I will make exceptions for missed payment. A lot of doctors do this. This is what medicine is all about."

Insured, at risk

Chronic illness can sap resources over time, while catastrophic medical problems such as cancer or stroke are particularly devastating.

"It's really difficult for those under 60, who lack a safety net," said Gerry Bishop, a social worker with Covenant HealthCare in Saginaw who often deals with underinsured patients who come to him through his cancer support groups. "We have had some people in desperate straits."

Financial stress is extreme when a family breadwinner gets sick and can't work, Bishop said. The family may have to pick up the full premium of its employer-based insurance while waiting the required two years for disability Medicare to kick in.

Bishop said he connects people with hospital payment plans and prescription assistance to help pay for chemotherapy.

Among those insured in 2004, a Families USA study shows some 1.4 million Michigan residents 64 and younger spent more than 10 percent of their annual earnings on health care costs (including out-of-pocket costs and premiums), and 365,000 residents spent more than 25 percent of their earnings on health care. The numbers include those with commercial insurance and Medicaid.

"There is a continuum of health and security," said Kathleen Stoll, director of health policy for Families USA. "The uninsured are most at risk, but many with insurance also are at risk. We are starting to see policymakers look at this continuum. When we cover the uninsured, that can get at the affordability of insurance by regulating the private market and lowering premiums. We can't just guarantee an offer of coverage but make sure it is affordable."

Safety net

A variety of health agencies in Saginaw County work to provide medical care for the underserved, mainly targeting residents without any insurance coverage.

Other providers focus on patients with Medicaid, including low-income families and people with disabilities who usually pay little out of pocket.

Nearly 5,000 low-income residents in Saginaw County receive benefits through the county's Saginaw Health Plan, which helps pay for office visits, X-rays and pharmaceutical expenses, but it doesn't cover services in hospital emergency rooms or hospital-based outpatient services.

The plan's new Tri-Share option allows county businesses with two to 20 employees to offer a health benefit package that includes physician visits, prescriptions, lab work, hospital stays and surgery. The cost for the coverage comes from the employer, employee and Saginaw Health Plan. Each chips in \$53 per month per employee, who can earn up to \$12 an hour.

About 60 percent of individuals in Michigan have employer-paid plans, data from the Menlo Park, Calif.-based nonprofit Kaiser Family Foundation shows.

President Bush's proposed tax increase would offset the cost of providing tax breaks for the 12 million people nationally, including about 400,000 in Michigan, who buy their own health insurance.

National health care advocates say efforts to make insurance affordable and accessible to everyone must consider the balance of personal insurance costs against income levels. Many state reform proposals rely on private insurance to achieve universal health coverage, but costs are increasing faster than wages, advocates say.

Employer-provided insurance plans are thinning coverage as companies aim to reduce costs, but workers who don't receive group coverage benefits are most at risk for expensive premiums, caps and exceptions, Stoll said.

People who have to purchase their own insurance now must realize they get what they pay for if they want low premiums, said Stoll, the health policy director.

"You have to look carefully at what services are provided, at the deductible and copays. Because you are healthy today doesn't mean you'll be healthy tomorrow, so that is the risk you take with not having good coverage."

Deciding how much to spend on insurance and how much risk to take is difficult for low-income families, she said.

"That's where regulating the industry isn't the answer. We also need more subsidies to help them afford coverage. Younger and healthier people may have to pay more now to help those who are older and sicker. That is the reality."

Planning ahead

Todd A. Alwood, 32, of Mount Pleasant, paralyzed from the chest down in a rodeo accident in September 2005, bought a supplemental insurance policy that he credits with keeping him out of medical debt. Friends, family and co-workers also rallied to raise funds for medical treatments.

Since the accident, he lives on Social Security disability payments of \$1,500 a month, from which he pays \$435 a month to continue his employer-based insurance.

His Blue Cross Blue Shield plan pays for 60 physical therapy visits a year, not enough to sustain his twice-weekly exercise sessions. The insurance won't pay for any of \$120,000 he hopes to spend to travel to the Neurovita Clinic at the Russian Academy of Medical Sciences in Moscow, where he can receive stem cell injections that could bring back movement in his legs, he said.

"It will cost that much for repeated trips over two or three years," he said.

Alwood said the treatments are possible only because family, friends and former coworkers at the Isabella County Sheriff's Department, where he was a jail guard, raised \$44,000 in two benefits for him.

Alwood spent months in hospitals and rehabilitation facilities, then lived with his brother's family. Now he lives in an apartment. He has home care three times a day, paid for with a Medicaid waiver. He hasn't built up medical debt, thanks to help from others, but he knows his situation could have turned out differently.

"When this happened, I did wonder about the future, but I put it in God's hands," he said. "I had a lot of support, and it's fortunate I have no family or kids to support."

Pinched families

Health care is this country's No. 1 domestic priority because so many families are feeling the pinch, advocates say.

"It's no longer an altruistic issue -- Do I want to help the uninsured?" Stoll said. "Now it is a matter of self interest. Many more people are touched by health care insecurity."

The Boston, Mass.-based The Access Project refers to the problem as "The Illusion of Coverage: How Health Insurance Fails People When They Get Sick." That's the title of the report released in March based on findings from in-depth interviews with dozens of insured Americans in seven states.

Medical debt had serious consequences for those interviewed, affecting access to care, financial security, employment, credit and quality of life, the study shows. Thirty-six percent of the underinsured had prescription drug, dental and vision coverage, and 11 percent had no coverage for any of them.

In 2005, nearly nine of 10 people who explored coverage and didn't have work-sponsored health care plans never bought a plan, Access Project data show. Most said they couldn't find affordable coverage. More than half of adults with this coverage had annual premium costs of \$3,000 or more.

"The reason there is no simple solution is that it's more than just the uninsured, the underinsured or payment reform," Constan said. "It's a dysfunctional system. It's disgraceful for this country to not be treating people right."

"We need to get fumed up about this, or nothing will happen. The young and well need to make themselves heard. If you get into debt after an illness, you are so busy surviving you don't have the energy to carry a sign." v



Insecurity is evident

Sunday, May 20, 2007

JILL ARMENTROUT

THE SAGINAW NEWS

The problems of the underinsured are more hidden than those of residents without any coverage, but Saginaw hospitals see evidence of their insecurity every day.

It's an increasing problem, officials at Covenant HealthCare and St. Mary's of Michigan say.

"This issue is of great concern to us and is a regular part of our daily interactions with our patients," said Paul M. Schaub, patient administration manager for Covenant.

Covenant doesn't have figures differentiating between the uninsured and underinsured, but so far this year \$15.2 million, nearly 2.3 percent of accounts receivable, are self-pay accounts that insurance doesn't cover. That's up from a year ago at this time, when it was \$12.9 million, or 2.19 percent.

Charity care -- health services that the hospital donates because the patient meets income requirements -- totals \$3.68 million so far this year, 16.4 of the total of accounts receivable.

St. Mary's charity care fund provides discounts on a sliding scale up to 100 percent, depending on patient income.

Covenant and St. Mary's are among Michigan's 146 nonprofit hospitals, that spend about \$110 million for charity care each year, a survey from the Michigan Health and Hospital Association shows.

Billing advisors at both hospitals screen patients to verify insurance coverage and benefits before admitting them, when possible. Patients must obtain authorizations and certifications for care.

"We try to educate them up front about their responsibility and financial obligations," said Rhonda Miller, director of revenue cycle for St. Mary's. "No one is turned away; we work with them."

If a patient doesn't think he has coverage, advisers work to identify a benefit plan that might qualify, including Medicaid, worker's compensation, veterans benefits and even auto insurance.

"Patients are becoming more educated about their benefits and making decisions about healthcare," Miller said. "They call us ahead of time to find out how much a procedure will cost and how much is out-of-pocket."

Plans often are confusing, she said, especially since many employers who used to cover 100 percent of care are putting more on their employees.

"I hear a lot more worries about this. That is a big shift," she said. "Every plan is different now, and patients are taking more responsibility."

If patients can't pay their bills, these hospitals offer financial assistance based on income levels, including tiered discounts and payment plans.

"After the screening, they tell us if they can afford to pay or not, or they say they can do it over several months," Miller said. "People are very honest."

Covenant sets up interest-free payment plans based on balances and the patient's ability to pay, Schaub said. Most don't exceed one year, but hospital officials are working with a bank to offer a new medical loan that will allow patients to finance balances over longer time periods with lower minimum payments. This could become available later this year, he said.

Hospitals don't usually question coverage during emergencies, but sticker shock can set in after a patient is admitted.

"We've had people already in the hospital fully unaware of their out-of-pocket costs when they have insurance but not real, full coverage," Miller said. "Some have insurance for outpatient services but don't have coverage for hospital stays. They get sick and end up here. It's our responsibility to help them." v

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— THE — ANN ARBOR NEWS

Video aims to cut baby deaths

Group releases DVD on sleeping infants

Saturday, May 19, 2007

BY SUSAN L. OPPAT

News Staff Reporter

"Now I lay me down to sleep, I pray the Lord my soul to keep. If I should die before I wake, I pray the Lord my soul to take."

That children's prayer found in a 1737 New England primer seems out of date, as if babies couldn't possibly die in their sleep anymore.

But they do, even in highly educated Washtenaw County.

And it's almost always preventable.

So the Coalition for Infant Mortality Reduction, a group of Washtenaw County health and child specialists, has released "Safer Sleep for Your Baby," a DVD that demonstrates how to properly handle sleeping infants.

Five children died in Washtenaw County in 2005 because of problems related to how or where they were sleeping, according to Marcia Dykstra, program director for the Washtenaw Area Council for Children.

Last year, Washtenaw County received state funding to reduce infant mortality rates and created a DVD that is drawing attention from agencies across the state because it pulls no punches. It features a mother whose infant son died at day care, where caregivers placed soft toys and blankets in the crib. He rolled over into them, and suffocated.

It also warns against parents who sleep with a baby, or caregivers who put a baby to bed anywhere other than a crib with a firm mattress and no soft materials inside.

In re-enactments of actual deaths, one baby rolled over into the crook of a mother's arm after she fell asleep during breast-feeding. Another baby slipped face-down between a parent's bed and the wall. Another infant simply turned its head into a pillow. The weight of a parent's arm across a baby's back kept the baby from drawing breath.

Dykstra said she is trying to get the DVD into area hospitals, where officials can show it to new mothers before they go home with their babies.

She said infant mortality dropped more than 80 percent after the national 1994 Back to Sleep campaign, which urged caregivers to put infants on their backs when put down for a nap or bedtime.

Dykstra is hoping the new campaign will reduce infant mortality even further.

More Safer Sleep information is available from the Washtenaw Area Council for Children, at 734-434-4215.

Susan Oppat can be reached at soppat@annarbornews.com or at 734-482-1166.

NICHOLAS D. KRISTOF

A Short American Life

How's this for a glimpse into America's health care mess:

The student winner I've chosen to accompany me on a reporting trip to Africa next month is a superb medical school student named Leana Wen. She receives her M.D. this month, and will research health care access this summer at a Washington think tank.

I asked Leana about her health insurance coverage, just in case she catches leprosy on the Africa trip.

"Actually, I was going to become one of the 45 million uninsured for the summer," she said. "The think tank does not provide insurance for 'temporary' employees, and my school did not allow extension of health insurance post-graduation. I still haven't found a reasonably priced insurance plan for this period."

Aaaaargh! When a newly minted doctor investigating Americans' access to medical care has no insurance — then you know that our health care system is truly bankrupt.

Let's hope that the presidential campaign helps lead us toward a new health care system. John Edwards has set the standard by proposing a serious and detailed plan for national health care reform, and other candidates should follow.

The medical and insurance lobbies have been busy blocking national health care programs since they were first seriously proposed back in the 1920's — and the result has been millions of premature deaths in this country because of people falling through the cracks. Doctors fighting universal coverage have been saving lives in their day jobs while costing lives with their lobbying.

Over all, a person without insurance is less likely to have diseases diagnosed early, less likely to get routine preventive care — and faces a 25 percent greater chance of dying early.

Americans with good jobs and complex needs receive superb medical care. But a child in Costa Rica born today is expected to live longer than an American child born today.

The U.S. now spends far more on medical care (more than \$7,000 per person) than other nations, yet our infant mortality rate, maternal mortality rate and longevity are among the worst in the industrialized world. If we had as good a child mortality rate as France, Germany and Italy, we would save 12,000 children a year.

It is disgraceful that an American mother has almost three times the risk of losing a child as a mother in the Czech Republic. According to a new report from Save the Children, a woman in the U.S. has a 1-in-71 chance of

losing a child before his or her fifth birthday.

Some speculate that America's high infant mortality rate is partly a result of greater honesty about neonatal deaths or of more in vitro fertilizations. But even if those are factors, they don't explain why a woman is 50 percent more likely to die in childbirth in the U.S. than in Europe.

The existing medical financing system also creates perverse incentives for expensive procedures; that may be why Americans are far more likely than Europeans to get C-sections. Meanwhile, the burden of paying for these second-rate statistical outcomes is crippling American business. By next year, the average Fortune 500 company will spend more on health care than it earns in net income, according to Steve Burd, the head of Safeway. Mr. Burd and other executives have formed the Coalition to Advance Healthcare Reform, creating a

Our perverse health care system.

corporate constituency for national health reforms.

There's evidence that the most efficient financing system would be a single-payer structure, such as that found in most Western countries. Some 31 percent of U.S. health spending goes to administration, more than twice the rate in Canada.

So bravo to Physicians for a National Health Program, a group of 14,000 doctors and other health professionals that favors a single-payer system.

But universal coverage is only part of the answer. We also need far greater attention to public health programs focusing on prevention. Two of the most important life-saving health interventions in recent decades weren't medical at all: the cigarette tax and laws mandating air bags and seat belt use. A national public health campaign on obesity (similar to the one Gov. Mike Huckabee started in Arkansas) should be an essential component of health care reform.

Even if a single-payer system isn't politically possible right now, universal coverage is feasible through other mechanisms — as Massachusetts has shown. We need to hold the presidential candidates accountable, for universal coverage is an idea whose time came in the 1920s. We should insist we get it before the 2020s. □

Child care providers to be recognized Monday

ESCANABA — May 11 was National Provider Appreciation Day. Locally, 4C of the UP is marking the day by having an evening of recognition Monday, May 21, for licensed child care providers. The special event being held at 6:30 p.m. at the Department of Human Services Conference Room, 2940 College Ave., Escanaba, is to recognize the hard work and dedication of providers, and to acknowledge their contributions to high-quality care.

Every day, licensed child care providers care for more than 1,000 children under the age of 5 in Delta County, said Sue Ellison, 4C Child Care Specialist of 4C of the UP. Currently 4C has 17 centers based programs, 11 group home and 37 registered home day child care providers.

It is estimated that nearly 12 million children under age 5 in the United States are in some type of child care every week.

"It takes a special person to work in the child care field and these individuals are often unrecognized," said Ellison. "This day offers an opportunity for parents to show their child care providers their appreciation."

The mission of the 4C of the Upper Peninsula is to help parents find licensed child care, to support and train child care providers, and to advocate for the highest quality of child care for parents, employers and the general public though out the Upper Peninsula.

"It is important that the care a child receives during the first five years of life be of high-quality because 90 percent of brain development occurs during those years," Ellison said. "By applauding the dedication of child care providers on May 21, we remind our communities of the importance of high-quality child care, and let providers everywhere know that we recognize and value their important work."

For more information on finding quality child care or wanting information to become a licensed child care provider, please contact Sue Ellison at (906) 789-7218 or [sellison@4c-up.com](mailto:suellison@4c-up.com). Also check out the 4C Web site at www.4c-up.com for upcoming training and events.

Detroit Free Press Letters

May 21, 2007

Adopted apart but close

I agree with J.J. Hitch's viewpoint on siblings being split up in foster care ("Children need help from Congress," May 6). It is a shame that some kids are not taken only from their birth parents, but they are split from siblings who could have been their only comfort.

As hard as it may be to find high-quality foster homes, it is equally difficult to find homes willing to take groups larger than two or three.

My two adopted daughters have two biological brothers who were adopted into a wonderful family. It is a responsibility and a privilege to maintain the relationship between my girls and their brothers, and I look forward to them growing up without the fear of losing each other.

Julie Palmer

Chesterfield Township

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To print this article open the file menu and choose Print.

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Article published May 21, 2007

Man pickets Friend of the Court office

By **Lisa Roose-Church**
DAILY PRESS & ARGUS

Oceola Township father Stephen Scholes said he has faithfully paid child support for years, but a recent change in his financial situation had him carrying a sign Friday that read: "FOC is unfair."

Scholes was recently laid off from his six-figure job as general manager for the Michigan Group due to the economy, and he is finding it difficult to make his \$362 weekly unemployment check stretch to meet his \$1,200-a-month obligation to Friend of the Court for child support.

He said he asked for relief, but FOC could not grant him immediate relief. Thus, his ex-wife received most of his check while he received a meager \$133.

"I'm not a deadbeat dad," he said as he picketed in front of the Livingston County Law Center on Highlander Way near Grand River Avenue. "Here's a dad doing the right thing, but let's be fair."

Friend of the Court Melissa Scharrer said Friday that she could not comment on an open case. However, she confirmed that Scholes has a hearing May 30 before a referee to "address his concerns."

Experts say Scholes' experience is not unique. As Michigan's economy continues its downward spiral, more and more divorced fathers are experiencing loss of income. Yet, current child-support laws do not allow for an automatic reduction in child-support payments consistent with the father's new income, if any.

Current statistics from Michigan's Office of Child Support show that there are now more than 1 million active child-support orders that are being enforced by Friend of the Court offices throughout Michigan. How many of those are similar to Scholes' situation was not immediately known Friday.

Genoa Township attorney Neal Nielsen, who practices family law, said when a parent has a change in economics, he or she must file a petition to modify child support. Alternately, if someone were to win the lottery, the custodial parent would have to take the initiative to increase support. The petition has to indicate the payer's current status and the change in circumstances. If granted, a reduction in payment is oftentimes not retroactive, Nielsen said.

That means Scholes, if his petition to reduce his child support is not approved, could still have to pay an amount he no longer earns.

Scholes said he has no problem supporting his 17-year-old daughter, and readily accepts that responsibility. However, he would like the rules to be more fair.

His picketing Friday probably had no real effect on the issue, Scholes acknowledged.

However, "it makes me feel better," he said.

Contact Daily Press & Argus reporter Lisa Roose-Church at (517) 552-2846 or at lrchurch@gannett.com.



Straining on food stamps

Sunday, May 20, 2007

IF ALL POLITICS ARE

local, then one needs only to gaze slack-jawed at hunger in Saginaw County to understand the folly of President Bush's plan to reduce funding for food stamps and other meal assistance for the poor by \$540 million over five years.

Consider:

r Demand for meals at Saginaw's East Side Soup Kitchen is up more than 20 percent in the past year.

r Earlier this month, one local food pantry, at Saginaw's West Michigan Avenue United Methodist Church, ran out of food and closed temporarily because demand for food was so high.

r One in six Saginaw County residents -- many of them children and senior citizens -- receive food stamps, a number significantly higher than Michigan's one in nine residents on foods stamps.

Since 2000, Michigan's food stamp caseload has doubled to 550,000 households, covering

1.1 million state residents, at the end of last year.

Nationally, some 35 million Americans -- about a third of them children -- live in households that cannot afford enough food. Yet about

26 million Americans receive food stamps, which amounts to a paltry \$1.05 per person, per meal.

Think about it.

Could you live on \$3 a day, or \$21 a week, in groceries?

And with gasoline prices and the cost of milk and other foods rising, low-income families are increasingly hard-pressed to stretch their grocery budgets. Making matters worse, Uncle Sam hasn't adjusted the formula for computing families' food stamps since 1996.

That must change.

Balancing the federal budget on the backs of the poor and hungry is unconscionable. This nation has a moral duty to feed its hungry, many of them working families. Among food stamp households with children, The New York Times noted this week, twice as many work as rely solely on welfare.

It's important that the program continues to provide benefits for those struggling families as the cost of living creeps higher.

This year's farm bill, which includes funding for food stamps, must end the erosion to the buying power of food stamps and make it possible for children, the elderly and the working poor to eat more healthful foods, including fruits and vegetables and leaner cuts of meat.

Congress should accelerate a provision passed in 2002, when the last farm bill passed, that would index the size of food stamp benefits to the cost of living. And it needs to make it easier for legal -- not illegal -- immigrant families with children, many of whom are U.S. citizens, barred by a five-year residency requirement, to receive food stamps.

Equally troubling is an administration proposal that would eliminate the Commodity Supplemental Food

Program and end food distribution to more than 78,000 people in Michigan -- 90 percent of them senior citizens.

In a country as abundant as the United States, there is no excuse for allowing children, senior citizens and working families to go hungry.

As Saginaw County food assistance agencies struggle mightily to fill in the holes of hunger that food stamps aren't filling now, Congress must make sure it doesn't make matters worse.

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Juvenile crime by girls is on the rise

Sunday, May 20, 2007

By Kameel Stanley

The Grand Rapids Press

GRAND RAPIDS -- Mike Pontius remembers the days when fighting used to be virtually a boys-only sport.

Ten years ago, a high female population at the 69-bed Kent County Juvenile Detention Center would have been 10 to 12 girls, Pontius said. Now, the average is 24.

Pontius is among many experts who have noticed an increase in girl violence, particularly in the past five years, following a national trend.

Although the latest studies show overall juvenile crime has decreased since the 1980s, crimes committed by girls have increased steadily.

According to the FBI's latest crime report on arrest trends, crimes committed by juvenile males decreased about 29 percent from 1996 to 2005. During that same period, however, female arrests decreased only half that much, about 14 percent.

More recent crime statistics also show a spike in girl delinquency, especially in violent crimes.

"It's sort of predictable, in a strange way," said Melissa Fickmund, a senior research associate at the National Center for Juvenile Justice, a Pittsburgh-based nonprofit research organization.

Society has changed, Fickmund said, as the fight for gender equality has permeated the nation's conscious. Girls are raised with the mentality that they can do anything and everything boys do.

"That equality's going to be achieved in some of the bad things, too," Fickmund said.

Experts are studying the trends in girl violence, Fickmund said, but the future remains uncertain. "Everybody is a little fearful, because the prevention programs have been cut back," she said.

It's important not to overreact, however, she said, as some people did when there was a sharp increase of juvenile crime in the mid-1990s.

There can be a number of factors that contribute to the most recent data spike, she said, such as beefed up police tactics, zero-tolerance policies in schools and society's increased willingness to believe females can be as violent as males.

People have to put things into perspective when examining girl violence, she said.

"The system is still dominated by bad boys," she said. "Their (girls) numbers are still few, far and between in the big picture."

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Aggression, questions rising among young girls

Sunday, May 20, 2007

By Kameel Stanley

The Grand Rapids Press

GRAND RAPIDS -- It started as typical playground teasing but escalated when one girl just wouldn't let up, accusing Maricela Pena's younger brother of wrongdoing.

Anger boiled in the then 8-year-old girl, who knew that "If I woulda tried to walk away, she would've kept saying stuff. ... She was all up in my face."

So Maricela hit her. Fighting became instinct, and Maricela, now 14, since has gotten into other scuffles, mostly with other girls.

Her latest clash, in December -- which Maricela disputes being a fight -- landed former Union High School Principal Janice Johnson in the hospital and got Maricela expelled from Grand Rapids Public Schools. On May 2, she was sentenced to juvenile probation and six hours of community service.

The incident made news because a principal was involved. It raised eyebrows because a girl was the aggressor.

But aggression among girls is not just about fighting. Rather than practicing behind-the-back social sabotage, girls these days are more "verbally assertive," said Jenny Fee, interim principal at East Grand Rapids High School.

"Now, I think they deal more face-to-face and up front," Fee said.

And that raises the question: Is it wrong that girls are more confrontational, or is the real issue that society is uncomfortable with it?

Expressing anger

"I think girls have been taught for too long that all we can do is smile," said Jane Dickie, a psychology professor and women's studies director at Hope College. "Women do have the freedom to express their anger ... but once we do move in that realm, we need to learn, just like men, to express it appropriately.

"The problem isn't women are behaving violently. The problem is culture as a whole not knowing how to express anger appropriately."

Female aggression traditionally hasn't been as blatant as its male counterpoint, said Larry Johnson, head of Grand Rapids Public Schools security.

"Now to see females fighting in public, fighting in the streets, fighting at places like The Rapid ... it's alarming," he said.

Before, news of fights among girls conjured images of hair-pulling, face-scratching "cat fights" that still elicit snickers, especially among older generations.

That contrasts with local and national statistics that show crimes committed by girls have increased steadily since the 1990s, despite a decrease in overall juvenile crime.

Still, violence and aggression among girls are treated as something of a novelty. Just recently, two young women who robbed a bank in Atlanta were dubbed the "Barbie Bandits" and made national news.

A double standard?

Such mixed messages make today's world confusing, girls say.

Theirs is a generation that has been raised to believe in gender equality, that girls are equal to boys. And yet, society still judges girls if their behavior doesn't match up to what is considered to be "ladylike."

"If there's two dudes fighting, it doesn't matter," said 14-year-old Maricela, who is finishing her freshman year at Crossroads Alternative High in Kentwood. "I don't think there is a certain way to

act. ... If the dudes don't have a certain way to act, the girls shouldn't either."

Maddy Hejna and Rachel Ormes, both 14, agree with Maricela -- to a point.

The girls, who live in East Grand Rapids, said they don't think girls are more aggressive -- just that they are on an equal playing field as boys.

"It's not as bad as 'Mean Girls,'" Rachel said, referring to the 2004 movie starring Lindsay Lohan.

Mixed messages

Some aggression -- such as in sports or in the workplace -- is accepted, even embraced.

But even the sports world sends mixed messages.

Sitting in a semicircle on the edge of a field after a practice, Jenison High School's girls varsity soccer team talked about the unspoken rules.

Being aggressive enhances competition during games, but for many girls, it's still taboo to do something that might be perceived as "rough" or "unfeminine."

"On the soccer field, you're supposed to be like all aggressive, and then when you go into public you're supposed to be all proper," Bailey Vos said. "It's like two different worlds."

But while their definitions of what is ladylike might line up with something their mothers would say -- sit cross-legged, wear heels when dressing up -- the girls said the difference with their generation is that they don't feel obligated to live by that definition.

"We can be whatever we wanna be," said a grinning Vos.

And when asked if they thought they themselves were ladylike, the team responded with a unified "no."

A social quandary

It's this social disconnect that makes the issue of female aggression more complicated than a simple issue of violence, experts say.

Girls today are living in a world of double standards, split between who they are and who society expects them to be.

"It is still the case that boys are raised to reject anything associated with girly-ness," Dickie said. "The opposite is not true. Girls are not raised to reject what's associated with boy-ness."

And that, Dickie said, is why the assertiveness that girls are displaying signals a permanent cultural shift in the United States.

"Some women have gotten the message that the ways in which we behave and the things we do don't have to be constrained by anyone's definition of what a lady should do," she said.

Norma Lopez, of Grand Rapids, said she witnesses girls struggling with their aggression in her job as a

GRPS family support specialist.

The 47-year-old grandmother of two young girls said she sees how girls and boys interact. It's much rougher today than when she was in school.

"It's like the boys are sitting down and the girls are taking over," Lopez said.

In many ways, girls are searching for power, said former Kent County juvenile probation officer Kathy Bailey, an assistant criminal justice professor at GVSU who has authored several books about youth violence.

Being proactive

For all the gender equity girls have been raised to expect, Bailey said, they still have an overwhelming number of examples -- such as in the workplace and many leadership positions -- suggesting men are the more powerful sex.

"The bottom line is that we know that girls get just as angry as boys, and we're not doing really good by either group," Bailey said.

Girls also are just as much casualties of a more violent society as boys, Dickie said.

"I just see it as being a huge problem in society," said Johnson, the school safety chief. "Our kids are being desensitized to the sex, the violence, the language, that they see."

To deal with girls who went wayward, ensuring they stayed out of the juvenile justice system, meant adjusting the approach to intervention.

Since 2001, Ottawa County officials have run a girls-only group for those on probation, recognizing that the female brain is wired differently, and the treatment traditionally used with boys does not work on girls, said Sandi Metcalf, assistant juvenile services director.

Metcalf, who has researched the issue extensively and spoken all over the country about girls, said the "magic equation" to dealing with girls is to first recognize they are equal, but different, from boys.

"Girls do not relate to detention. It is not a deterrent," she said. "It's all about relationships. It makes all the difference in a girl's life."

Stability, good male and female mentors and steady, healthy relationships is what it takes to make girls successful, Metcalf said.

In Grand Rapids, the YWCA has taken up the issue through its Girls Incorporated program, specifically in an effort called Project Bold.

The program, which began in 2001 and has been used in four Grand Rapids high schools, focuses on conflict management tools, critical thinking skills and openly discussing ways to prevent female violence.

Many girls have begun to deal with their aggression and anger by confronting the deeper underlying personal or family issues, said director Anika Smith. Even a few potential fights have been quelled, with the girls learning to talk to each other or let small things go.

"There's just so many holes in helping them," Smith said. "They are truly a product of their environments. It is survival of the fittest out there."

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Lerma to be placed in juvenile rehabilitation program

Hearings will be held every six months to determine 15-year-old's progress

By:

Posted: 5/16/07

(Updated on 5/18/07)

Trevor Lerma, a 15-year-old Mount Pleasant resident, was given a "blended sentence" today for his part in the Sept. 24 stabbing of Nick Parmer and Dan Richardson.

The court found the prosecution had met the burden to sentence Lerma as an adult, but will hold the sentence to allow him to be placed in juvenile rehabilitation.

Lerma will be placed on probation by the Department of Human Services and will stay in a locked juvenile facility. Review hearings will be held every six months to determine his progress.

If the court decides Lerma is not succeeding in the program, Lerma then will be sentenced as an adult and could face 29 to 54 months, with a maximum sentence of 10 years.

Stay tuned to cm-life.com for further updates concerning this case.

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MORNING SUN

Teen sentenced to juvenile treatment facility

By [SUSAN FIELD](#)
Clare Managing Editor

A Mt. Pleasant teen who stabbed two Central Michigan University students last fall could spend as long as six years in juvenile treatment.

Isabella County Trial Judge William Ervin on Friday ordered Trevor Lerma, 16, to stay at a Bay County juvenile detention facility until the Michigan Department of Human Services can place him in a residential treatment center.

Ervin also ordered Lerma, who pleaded guilty April 13 to the stabbings of Nick Parmer and Daniel Richardson Sept. 24, to pay \$4,270 in restitution, including travel and housing costs for Parmer, who was hospitalized for five days after being stabbed eight times during an altercation outside Parmer's Mt. Pleasant apartment.

Richardson, who was not at the sentencing, was stabbed once while trying to separate Parmer and Lerma.

In rendering the "blended" sentence, Ervin told the teen that he faces time in prison if he cannot be rehabilitated.

Lerma was sentenced as an adult, but the judge held imposition of an adult prison sentence in abeyance and diverted him into the juvenile system for long-term placement.

Ervin, Prosecutor Larry Burdick and defense attorney Dan O'Neil were in agreement that Lerma, who has juvenile assault convictions, should get a chance to straighten out his life.

Burdick questioned whether Lerma should be sentenced to prison as an adult - in effect "throwing away the key" on any chance that the teen could turn his life around.

He also spoke of the seriousness of the offense - Lerma pleaded to assault with intent to commit great bodily harm less than murder and assault with a dangerous weapon - and the likelihood that Parmer could have died.

"Clearly, this was a serious offense," Burdick said. "Frankly, eight stab wounds; it's by the grace of God that (Parmer didn't die).

"An inch this way, an inch that way, and Mr. Parmer would have bled to death."

Burdick offered two points of view on punishment for Lerma - that he crossed the line and should go to prison and that treatment could be effective.

Either way, Burdick said, Lerma is "on the edge."

"He has a chance, and probably his last chance, to turn his life around," the prosecutor said.

Parmer spoke to the judge about how the stabbing affected his life and family, saying that his parents lived "a parent's worst nightmare."

Parmer, who had to drop most of his classes while recuperating from the stab wounds, had serious breathing difficulties and told the judge that his surgeon said he runs a lifetime risk of rupturing his spleen.

He also said he believes Richardson saved his life by pulling him away from Lerma during the altercation.

"I am very lucky and blessed to survive the attack," Parmer said. "I think he had the knife open and hidden.

"Afterward, he had no remorse."

O'Neil countered that Lerma could not show remorse because of the nature of the criminal justice system.

O'Neil also believes that, in giving Lerma a chance to change, Ervin was trying to find a solution rather than giving up on the boy.

"I think Judge Ervin took the enlightened approach, the approach embraced by all of the judges in our county," O'Neil said. "The best way to protect society is to fix the problem.

"Destiny is now in the hands of Mr. Lerma."

Burdick agreed that the sentence was reasonable in light of all the information; Lerma's probation officer and a DHS worker both testified before the sentencing that they believe Lerma should be placed in long-term treatment.

Lerma offered his apologies before Ervin's sentencing.

"I'm truly sorry for this incident, to both my family, the Parmer family as well as the Richardson family," he said. "I want to go home to my family.

"I know the quickest way to do that is to work my way through the program."

O'Neil's assessment of the night of the stabbings - that Parmer and Richardson were breaking the law by hosting a "blind pig" party and allowing minors to drink - fell short with the judge and Burdick, who said Lerma and his friends were drunk before they crashed the party.

Blaming Parmer and his roommates would be disingenuous, Burdick said.

While Parmer and his roommates should not have hosted a party, he said, Lerma's actions were not their fault.

Ervin, who noted that Lerma's past offenses are relatively minor and that Lerma graduated from the Isabella County day treatment program for juveniles, said Parmer and Richardson's actions the night of the stabbing weren't relevant.

"This isn't about the actions of the victims that night," he said. "This is about the actions of Mr. Lerma that night."

Ervin also noted that Parmer's vision of Lerma becoming an "violent man" without intervention, was insightful.

"I want to prevent Trevor Lerma from becoming a very violent man," Ervin said, adding that he believes if the teen was sent to prison, he would simply be "warehoused" and not have access to help.

Ervin ordered that Lerma's case be reviewed every six months.

Click here to return to story:

http://www.themorningsun.com/stories/051907/loc_sentenced001.shtml

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Teen sentenced following stabbings of CMU students

MOUNT PLEASANT, Mich. -- A 16-year-old who pleaded guilty to assault charges in the stabbings of two Central Michigan University students was sentenced Friday to a juvenile facility and ordered to pay restitution.

The Mount Pleasant teen will be placed in the Bay County Juvenile Detention Facility, pending further placement by the Michigan Department of Human Services.

He was also ordered to pay nearly \$4,300 in restitution to one of the victims, and could face a similar order for the second victim, court officials said.

Police said the teen stabbed the two students last September during a party at their apartment. One victim was stabbed once in the chest and several times in the side and arm. He spent five days in a hospital and couldn't return to class for three weeks.

The second student was treated for a stab wound to the arm.

The teen previously pleaded guilty to assault with intent to do great bodily harm, a maximum 10-year felony, and to felonious assault with a dangerous weapon, which carries a maximum 4-year sentence.

His blended sentence was part of a plea agreement with prosecutors, which imposes an adult sentence but places the offender in juvenile custody up to age 21.

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The Daily Telegram

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MONDAY MAY 21, 2007 Last modified: *Friday, May 18, 2007 10:58 PM EDT*

Student's expulsion proposed

— Morenci Superintendent Kyle Griffith is recommending indefinite suspension for the student accused of calling in two bomb threats.

By [David Frownfelder](#)

Daily Telegram Staff Writer

MORENCI — A 16-year-old Morenci High School student facing charges in the bomb threat Wednesday that forced the temporary evacuation of the school building is also looking at an indefinite suspension from school.

In a written statement Friday, Superintendent Kyle Griffith said, "I am recommending that the board take action on an indefinite suspension with a recommendation for expulsion at the June board meeting."

The board's regular meeting will take place at 7 p.m. June 4 in the middle school library.

Students and staff at Morenci High School were evacuated for several hours Wednesday morning after two threats were discovered on the school's answering machine. Investigators from the Morenci Police Department, the Lenawee County Sheriff's Department and the Michigan State Police followed the line of evidence and arrested the student Wednesday afternoon, Morenci Police Chief Larry Weeks said.

Griffith said the student is in the Hillsdale Juvenile Corrections facility awaiting juvenile court action. The charge of making a false bomb threat carries a maximum penalty of four years in prison and/or a \$2,000 fine. If convicted, the student could also be required to repay the cost for expenses incurred as a result of the threat.

"We also had a staff member injured in a fall on the way to the evacuation site," Griffith said. "There is an additional charge the student faces for making terrorist threats causing injury. This is a 20-year felony."

After people were evacuated from the high school, bomb detection dogs from the sheriff's department and the Michigan State Police searched the building. Nothing out of the ordinary was found, Weeks said Wednesday, and classes resumed without further incident by late morning.

"The Morenci Area Schools does not and will not take this matter lightly," Griffith wrote in the statement. "It is the intention of this district to send a strong message, within the framework of the school, as well as the furthest extent of the law."

-- CLOSE WINDOW--

Published May 20, 2007
[From Lansing State Journal]

Where to get help to avoid a heating shutoff

These agencies may be able to help people who are unable to pay their utility bills. Most programs have income limits and other requirements to qualify.

, Michigan Department of Human Services: Ingham County, 887-9400; Eaton County, 543-0860; Clinton County, (989) 224-5500

, Capital Area Community Services: 393-7077

, Salvation Army; 484-4424

, St. Vincent DePaul Society Referral Service: Ingham County, 484-4228; In Eaton County, Charlotte, 543-2366; Eaton Rapids, 663-4735; Clinton County, (989) 224-8994

, Clinton County Cares: (989) 224-1173

, Heart and Hands, Eaton Rapids: 663-7104.

, Lansing Board of Water and Light customers should call 702-6006 to discuss ways to avoid shutoff.

, Consumers Energy customers should call (800) 477-5050 to discuss ways to avoid shutoff.

, Assistance with weatherization services for low-income households: Call Michigan Community Action Agency Association, 321-7500, or go to www.mcaaa.org, or check Michigan Department of Human Services Web site www.mi.gov/dhs.

MIRS

May 18, 2007

MI Has Highest Unemployment...Again

Michigan once again has the nation's highest unemployment with an unemployment rate of 7.1 percent, according to data released by the U.S. Bureau of Labor Statistics.

Michigan lost 4,600 jobs while the unemployment rate spiked from 6.5 percent to 7.1 percent, once again making it the highest in the nation.

Mississippi has the next highest unemployment at 6.8 percent. Michigan was also one of only two states (Illinois was the other) that registered large unemployment rate increases from the month before.

Montana recorded the lowest unemployment rate, 2.2 percent, in April. The states with the next lowest rates were Hawaii at 2.4 percent and Utah at 2.5 percent.

The national unemployment rate was essentially unchanged in April at 4.5 percent, but was down from 4.7 percent a year earlier.

"Today's reminder of where Michigan's economy is should not come as a surprise to anybody," said Michigan Republican Party (MRP) Chairman Saul ANUZIS. "Even with clear indicators showing that Michigan businesses are suffering more than in any other state, Governor Granholm and Democrats in the state House continue their crusade to raise taxes on businesses and consumers. The data released today, along with releases in previous months, clearly show that this is the wrong path for Michigan."

MIRS

May 18, 2007

Granholm Signs Work First Bill

Gov. Jennifer GRANHOLM signed a bill (HB 4482) today that a person 16 years old or older who is not attending school full-time and is receiving welfare assistance has to participate in Work First activities.

HB 4482, introduced by Rep. Brenda CLACK (D-Flint), would re-write sections of the Social Welfare Act so children this age who are not in school full-time could get welfare benefits if they work.

The Department of Human Services (DHS) would first determine if the youth is eligible for the Work First program. If they were, the DHS, the individual and a Work First representative would develop the family's self-sufficiency plan.

If they don't participate in the program, the family would be ineligible for family independence assistance.

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Michigan budget worse than thought

Updated: May 21, 2007 04:34 AM EDT

By RICK ALBIN

LANSING - As 24 Hour News 8 has been reporting, a revenue estimating conference verified the state is deeper in debt than experts guessed earlier this year.

For the current fiscal year, there is an \$800 million shortage - more than the \$700 million 24 Hour News 8 was using.

That's both a cash shortage - not enough money to pay for promised services - and spending pressures, which result from higher case loads of cost than the original budget proposal.

The shortages come from the general fund and the school aid fund. The general fund pays for Community Health, state police, and the Department of Human Services, and is about \$600 million short. The other \$200 million is in the school aid fund.

If other resolutions can't be found, Gov. Granholm has already sent warning letters to schools of cuts well over \$100 per student, and a 6 percent reduction in Medicaid reimbursements.

The GOP-controlled Senate has proposed cuts that would mitigate both of those, making the school aid cuts less than \$40 per student.

No one has agreed on a plan to fix this year's budget, and virtually no work has been done on next year's budget. A flurry of negotiations next week is expected behind closed doors and would include Granholm, Senate Majority Leader Mike Bishop and Speaker of the House Andy Dillon.



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MIRS

May 18, 2007

Triangle Project In Holding Pattern

A proposal to move the Michigan State Police (MSP) headquarters to a yet-to-be-built downtown Lansing high-rise has been put on hold until the state's foggy budget picture becomes clearer, the Department of Management and Budget (DMB) confirmed today.

The \$95 million, 25-year "Triangle Project" lease named for the triangle-shaped piece of land on which the new headquarters is set to be built, was given the go-ahead by a joint House-Senate committee two months ago (See "Triangle Property Given Green Light," 3/15/07).

But with the state budget an estimated \$803 million in deficit in Fiscal Year (FY) 2007 and another \$1.6 to \$1.86 billion for FY 2008, DMB officials want to make sure sufficient revenue is coming into the state before the State Administrative Board gives the project final signoff. Even though the new lease doesn't impact the General Fund until FY 2009, the administration doesn't want to add spending pressures, said DMB Spokesman Edward WOODS III.

"It doesn't hurt to re-look at our finances and that's basically what we're doing," Woods said. "Because once that ground is turned, it's hard to go back."

Currently, the state is paying \$1 a year to house the MSP headquarters at its old Harrison Road location across the street from Michigan State University. That location is antiquated, however, and the MSP is anxious to move into a modern facility. The triangle property is located along the Grand River at the corner of Grand Avenue and Kalamazoo Street. The annual lease payment would be \$3.685 million (plus a \$93,000 management fee).

Developer Joel FERGUSON, the lead on the Triangle Project, said the delay was symbolic. In the end, he said, "We know that they will get all worked out."

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Rotary selects Marilu Franks for Paul Harris

By JOHN EBY / Dowagiac Daily News
Friday, May 18, 2007 10:51 AM EDT

For a lifetime of "doing everything just right but put the lid on the toothpaste," Marilu Franks became a Dowagiac Rotary Club Paul Harris Fellow Thursday.

That last detail, of course, made her jaw drop because until that moment her husband, Mike, succeeded in keeping her selection secret.

A magician never reveals how he pulls off his tricks.

The local club makes a \$1,000 donation in her name to Rotary International's foundation.

Leadership, self-confidence, generosity, compassion, persuasion, ethics and honesty factor into a Paul Harris Fellow for community service, Mike said.

While the toothpaste tube cap isn't important to Marilu, "She finds important the gifts she can give, and if she has to leave the lid off to go do it, she does.

"One of the things that's very impressive in my mind that she's done was to go to the Lila Acheson Wallace Foundation and persuaded the co-founder of Reader's Digest's very wealthy foundation" to assist Interlochen.

She graduated from Muskegon High School in 1958 and attended Muskegon Community College, where she met her future husband.

Marilu, the mother of three daughters, graduated from Western Michigan University.

"She got her degree over a period of 14 years," Mike said. "She taught school in Muskegon Heights, put her name on the state list and ended up in Dowagiac as a CETA counselor. When that went to the county, she joined the Department of Social Services (DSS, later the Family Independence Agency, or FIA, and today, the Department of Human Services, or DHS), where she worked for 25 years. It's only ironic fate that she worked with kids, having been a Girl Scout leader and having three daughters.

"She cares about kids," he said. "She worked 14 years in the field, looking after the kids of Cass and Berrien counties. She then became supervisor of the Protective Services department and did that for another 10 years. She came to Rotary before me and brought me into it, along with a number of other people."

Franks said his wife has done sales work and interview work for surveys in the southern part of the state - from Detroit to Grand Rapids.

"She served as two years" as Rotary secretary, Mike said. "She worked on the basketball shootout and the reverse raffle and as an evaluator and board member for RYLA (Rotary Youth Leadership Award) camp. She is on the international student exchange committee presently. In 2000, she received a district citation for enrolling 24 Rotarians in this club who were foundation benefactors. She hosted two Rotary exchange students and one from a non-Rotary program. She's done for young people all her life."

Marilu said, "I never expected anything like this. This is just great. I do love Rotary and everything it represents. I will wear it with pride."

Cindy Roessler said when she was at Lewis Cass Intermediate School District (LCISD) and Franks retired from social work, she persuaded her to teach "probably the toughest kids we had," with severe emotional impairments.

"She took the job on and in her classroom there were always cool books. I'd say, 'You didn't ask for money for this stuff.' She'd say, 'That's okay, I bought them.' She bought thousands of books for these kids and she did a wonderful job for Lewis Cass as a teacher and she still subs. That's a big part of who she is, too."

Hugging her husband, Marilu asked, "How did you keep it a secret?"

"A very well-deserving recipient," said President Brad Yazel.

Don Woodhouse's father, Mayor Graham Woodhouse, won the Dowagiac's club's first Paul Harris Fellow on Jan. 15, 1977.

The award is named after Rotary International's 1905 founder, a Chicago attorney.

The idea for the Paul Harris was conceived in 1917, but took off after Harris died in 1947.

"That year, they took in \$1.3 million," Woodhouse said. "Today, Rotary Foundation has assets of \$640 million. Dowagiac over the years has awarded in excess of 90 Paul Harris Fellows and has raised over \$125,000 for the foundation. Foundation programs enable Rotarians to provide food, clean water, health care, education and a better standard of living to people in different circumstances around the world."

Woodhouse said foundation contributions totaled \$112 million in 2005-06.

"We celebrated the historic milestone of recognizing the 1 millionth Paul Harris Fellow," he said.